

Serial No.: 10/672,439

Attorney Docket No.: 2003P08209US01

RECEIVED  
CENTRAL FAX CENTER**PATENT**

SEP 01 2005

**ATTORNEY DOCKET  
NO. 2003P08209US01**IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Applicants: Caspi, et al.

Serial No.: 10/672,439

Filed: September 26, 2003

Title: SYSTEM AND METHOD  
FOR PRESENCE-BASED  
AREA MONITORING

Group Art Unit: 3662

Examiner: Issing

CERTIFICATE OF FACSIMILE TRANSMISSION

The undersigned hereby certifies that this document is being  
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Date Transmitted: September 1, 2005

By:

Jeanette L. Taplin

REQUEST FOR CONTINUED EXAMINATIONRECEIVED  
OIPE/IAP

SEP 02 2005

Commissioner for Patents  
P.O. Box 1450  
Arlington, VA 22313-1450

Sir:

1. Applicant hereby requests continued examination, in accordance with 37 C.F.R. §1.114, for the above identified application.

TIME REQUEST IS BEING MADE

2. This request is being submitted:
- i. ☒ Prior to abandonment of the application
  - ii. ☐ With payment of the issue fee
  - ☐ Prior to payment of issue fee
  - ☐ Issue fee has been paid but a petition under §1.313 has been granted
  - iii. ☐ Prior to a decision on appeal to the Board of Patent Appeals & Interferences
  - ☐ A notice is being separately sent to the Board of Patent Appeals & Interferences that this Request for Continued Examination is being filed.

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**ENCLOSURES**RECEIVED  
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SEP 01 2005

3. Enclosed herewith is/are:

- ☒ A Petition for Extension of Time for one (1) month(s).  
☐ Please enter the Amendment filed \_\_\_\_\_  
☒ Please enter the enclosed Preliminary Amendment.  
☐ An Information Disclosure Statement (37 C.F.R. §1.98) with PTO-1449  
and \_\_\_ references.  
☐ New arguments  
☐ New evidence in support of patentability  
☐ Other:


**FEE FOR REQUEST (37 C.F.R. §1.17(e))**4. ☒ Filing fee has been calculated as shown below after entering the previous amendment (other than small entity):

For	Claims Remaining After Amendment	Highest Number Previously Paid For	Present Extra	x Rate	Additional Fees
Total Claims	19	-20	=0	x \$ 50	\$ 0.00
Indep. Claim	4	-4	=0	x \$200	\$ 0.00
<input type="checkbox"/> First Presentation of a Multiple Dependent Claim				+ \$300	\$ 0.00
				Basic Filing Fee	\$ 790.00
				Total	\$ 790.00

5. ☒ Please charge Deposit Account No. 19-2179 in the amount of \$790.00. The Commissioner is hereby authorized to charge any fees that may be required, or credit any overpayment to Deposit Account No. 19-2179 pursuant to 37 C.F.R. §1.25. A duplicate copy of this sheet is enclosed.

PLEASE MAIL CORRESPONDENCE TO: Respectfully submitted,

Siemens Corporation  
Customer Number: 28524  
Attn: Elsa Keller, Legal Administrator  
Intellectual Property Department  
170 Wood Avenue South  
Iselin, NJ 08830

  
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